

STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY DIVISION OF MORTGAGE LENDING

1830 College Parkway, Suite 100 Carson City, NV 89706 (775) 684-7060 Fax (775) 684-7061 www.mld.nv.gov

APPLICATION FOR RENEWAL OF REGISTRATION

(Credit Service Organization)

Mail to the Division of Mortgage Lending at the above address.

The undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending for renewal of a credit service organization registration.

Corporate Name of Credit Service Organization:		
DBA, if applicable:		
Registration No.:		
Address of Physical Location of Credit Service Organization	1:	
Street Addres	SS	
City	State	Zip
Telephone No.: (Must be a Local Land Line)	Fax No.:	
E-Mail:(Mandatory)	Taxpayer Identification No.: _	
Name of Key Employee:		
Key Employee's Telephone No.: (Must be a Local Land Line)	Key Employee's E-Mail: (Mand	datory)
Key Employee's Fax No.:		

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

Name	Address	Telephone No.	Social Security No.	Percentage of Interest Helo (Must Equal 100%)
List all employees of the	e credit service organiza	ation applicant:		
Does the credit service of Yes No	organization currently h	nold a bond?		
ond No.:		Amount of Bon	d: \$	
ame and address of the c	orporate surety issuing	the bond:		

	Service		Fee	
	vice organization applicant designates the fo	illowing natural person as	s its reside	in agent for service of
legal process: Name of Resident	t Agent:			in agent for service of
legal process: Name of Resident				
legal process: Name of Resident Address of Reside	t Agent:	City	State	Zip
legal process: Name of Resident Address of Reside Resident Agent's	t Agent:ent Agent: Street Address	City Resident Agent	State	Zip
legal process: Name of Resident Address of Reside Resident Agent's Resident Agent's	ent Agent: Street Address Telephone No.:	City Resident Agent's	State s Fax No.:	Zip
legal process: Name of Resident Address of Reside Resident Agent's Resident Agent's	ent Agent: Street Address Telephone No.: (Must be a Local Land Line) E-Mail: (Mandatory) organization applicant acknowledges that i	City Resident Agent's t will continuously maintain security (irrevocable lettor, issued by a bank who	State s Fax No.: in a reside ter of crec se deposit	Zip Int agent for service of dit for which the credits are federally insured

I, the undersigned, state that I am authorized to sign the within Application for Renewal of Registration (Credit Service Organization) on behalf of the applicant named herein; that I have read and signed the Application for Renewal of Registration (Credit Service Organization) and know the contents thereof and that the statements made therein are true. By signing below, I represent that I have personally completed this Application for Renewal of Registration (Credit Service Organization) and verified the information contained herein.

I acknowledge that all fees paid to the Division in conne	ection with this app	olication are non-refun	dable.	
Name of Applicant:(Credit Service Organization)				
By:Authorized Signatory (Owner)				
Printed Name:				
Date:				
Subscribed and sworn to before me the	day of		, 20	
Notary public in and for the County of		, State of		
My commission expires				
Notary Signature				
Notary Seal				